

C10FM211169

IN THE CIRCUIT COURT FOR Frederick County

(City or County)

## CIVIL - DOMESTIC CASE INFORMATION REPORT

## DIRECTIONS

**Plaintiff:** This Information Report must be completed and attached to the complaint filed with the Clerk of Court unless your case is exempted from the requirement by the Chief Judge of the Court of Appeals pursuant to Rule 2-111(a).

**Defendant:** You must file an Information Report as required by Rule 2-323(h).

**THIS INFORMATION REPORT CANNOT BE ACCEPTED AS A PLEADING**

FORM FILED BY:	<input checked="" type="checkbox"/> PLAINTIFF	<input type="checkbox"/> DEFENDANT	CASE NUMBER	(Clerk to insert)
CASE NAME:	Mariya Spasova Mihova Scarborough		vs. William Joseph Scarborough	
	Plaintiff		Defendant	
PARTY'S NAME:	Mariya Spasova Mihova Scarborough		PHONE:	301-699-7805
PARTY'S ADDRESS:	6317 Posey Street, Frederick MD 21703			
PARTY'S E-MAIL:	mariyascar05@gmail.com			
If represented by an attorney:				
PARTY'S ATTORNEY'S NAME:			PHONE:	
PARTY'S ATTORNEY'S ADDRESS:				
PARTY'S ATTORNEY'S E-MAIL:				
<input checked="" type="checkbox"/> I am not represented by an attorney				
RELATED CASE PENDING? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, Case #(s), if known:				

## PLEADING TYPE

New Case:  Original

Existing Case:  Post-Judgment  Amendment

If filing in an existing case, skip Case Category/ Subcategory section - go to Issues section.

## SPECIAL REQUIREMENTS

Spoken Language Interpreter - Attach form CC-DC-041

If you require an accommodation for a disability under the Americans with Disabilities Act - Attach form CC-DC-049

## ALTERNATIVE DISPUTE RESOLUTION INFORMATION

Is this case appropriate for referral to an ADR process under Md. Rule 17-101? (Check all that apply)

A. Mediation  Yes  No C. Settlement Conference  Yes  No

B. Arbitration  Yes  No D. Neutral Evaluation  Yes  No

If no, explain why: We reached mutual consent for divorce

## IF NEW CASE: CASE CATEGORY/SUBCATEGORY (Check one box.)

## Domestic Family

Alimony/Spousal Support  
 Annulment  
 Breach  
 Child Support - Private  
 Custody  
 Divorce  
 Emancipation  
 Enforce Foreign Order  
 Family Legal/Medical  
 Paternity/Parentage  
 Recognition as Legal Child  
 Visitation

## Agency/IV-D

Child Support  
 Paternity/Parentage  
 UIFSA

## Adoption

Adoption - Independent  
 Adoption - Private Agency

## Change of Name

Change of Name  
 Adult  
 Minor

## Guardianship

Guardianship of Adult Person and/or Property  
 Guardianship of Minor Person and/or Property

## Independent Proceedings

Amend Birth Certificate  
 Change of Sex  
 Correct Death Certificate  
 Declare Deceased  
 Dispose Body  
 Amend Marriage Certificate

### IF NEW OR EXISTING CASE: ISSUES (Check All that Apply)

<input type="checkbox"/> Adoption	<input type="checkbox"/> Change of Name	<input type="checkbox"/> Earnings Withholding	<input type="checkbox"/> Pension Distribution
<input type="checkbox"/> Alimony/Spousal Support	<input type="checkbox"/> Adult	<input type="checkbox"/> Emancipation	<input type="checkbox"/> Property Distribution
<input type="checkbox"/> Permanent	<input type="checkbox"/> Minor	<input type="checkbox"/> Enforcement	<input type="checkbox"/> Protective Order
<input type="checkbox"/> Rehabilitative	<input type="checkbox"/> Change of Sex	<input type="checkbox"/> Exceptions	<input type="checkbox"/> Register Foreign Order
<input type="checkbox"/> Amend Birth Certificate	<input type="checkbox"/> Child Support	<input type="checkbox"/> Family Legal/Medical	<input type="checkbox"/> Restore Former Name
<input type="checkbox"/> Amend Death Certificate	<input type="checkbox"/> Contempt	<input type="checkbox"/> Gdnshp of Adult	<input type="checkbox"/> Termination of Gdnshp
<input type="checkbox"/> Amend Marriage Certificate	<input type="checkbox"/> Court Costs/Fees	<input type="checkbox"/> Person	<input type="checkbox"/> Transaction Review
<input type="checkbox"/> Annulment	<input type="checkbox"/> Custody	<input type="checkbox"/> Property	<input type="checkbox"/> Use and Possession
<input type="checkbox"/> Asset Determination	<input type="checkbox"/> Declare Deceased	<input type="checkbox"/> Gdnshp of Minor	<input type="checkbox"/> Visitation
<input type="checkbox"/> Change of Name	<input type="checkbox"/> Dispose Body	<input type="checkbox"/> Person	
<input type="checkbox"/> Adult	<input checked="" type="checkbox"/> Divorce - Absolute	<input type="checkbox"/> Property	
<input type="checkbox"/> Minor	<input type="checkbox"/> Divorce - Limited	<input type="checkbox"/> Paternity/Parentage	

### ESTIMATED LENGTH OF HEARING

*(Case will be tracked accordingly.)*

Time estimate for a Merits Hearing:  Hours  Days  
 Time estimate for hearing other than a Merits Hearing:  Hours  Days

### OTHER MATTERS

IS THIS CASE CONTESTED?  Yes  No If yes, which issues appear to be contested?

Ground for divorce  
 Child Custody  Visitation  
 Child Support  
 Alimony  Permanent  Rehabilitative  
 Use and possession of family home and property  
 Marital property issues involving:  
 Valuation of business  Pensions  Bank accounts/IRA's  Real Property  
 Other: \_\_\_\_\_  
 Paternity  
 Adoption/termination of parental rights  
 Other: \_\_\_\_\_

Request is made for:  Initial Order  Modification  Contempt  
 Absolute Divorce  Limited Divorce

For non-custody/visitation issues, do you intend to request:

Court-appointed expert (name field) \_\_\_\_\_  Initial conference with the Court  
 Mediation by a Court-sponsored settlement program \_\_\_\_\_  Other: \_\_\_\_\_

For custody/visitation issues, do you intend to request:

Mediation by a private mediator  
 Evaluation by mental health professional  
 Other Evaluation \_\_\_\_\_  Appointment of counsel to represent child  
 (not just to waive psychiatric privilege)  
 A conference with the Court

Is there an allegation of physical or sexual abuse of party or child?  Yes  No

7-16-21

Date

6317 Posley Str.

Address

Frederick

MD

21703

City

State

Zip Code

Signature of Counsel / Party

Attorney Number

MARIYA SPASOVA Mihova Scarborough

Printed Name